

Program B: Patient Services

OBJECTIVES AND PERFORMANCE INDICATORS

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2002-2003. Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicators are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year of the budget document.

The objectives and performance indicators that appear below are associated with program funding in the Base Executive Budget for FY 2002-2003. Specific information on program funding is presented in the financial section.

DEPARTMENT ID: 09 - Department of Health and Hospitals

AGENCY ID: 09-319 - Villa Feliciana Medical Complex

PROGRAM ID: Program B - Patient Services

1. (KEY) To provide medical services in a cost effective manner to an average daily census of 196 patients.

Strategic Link: This objective implements Goal 1 Objective 1.1 of the Strategic Plan: To provide medical services in a cost effective manner to an average daily census of 210 patients through FY 2006.

Louisiana: Vision 2020 Link: Goal Three: To have a standard of living among the top ten states in America and safe, healthy communities where rich natural and cultural assets continue to make Louisiana a unique place to live, work, visit, and do business.

Children's Cabinet Link: Not applicable

Other Link(s): Healthy People 2010: Goal 1, Objective 15 in Healthy People 2010 links in a general way to the operations of the Villa Feliciana Medical Complex: Increase the proportion of persons with long term care needs who have access to the continuum of long-term care services.

Explanatory Note: With the exception of the last indicator, all of the performance indicator values calculated are derived from census, admissions, budget and total of employees information.

L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
		YEAREND PERFORMANCE STANDARD FY 2000-2001	ACTUAL YEAREND PERFORMANCE FY 2000-2001	ACT 12 PERFORMANCE STANDARD FY 2001-2002	EXISTING PERFORMANCE STANDARD FY 2001-2002	AT CONTINUATION BUDGET LEVEL FY 2002-2003	AT RECOMMENDED BUDGET LEVEL FY 2002-2003
S	Average daily census	240	215	240	210	210 ¹	196
K	Total clients served	337	306	317	317	317 ²	317
K	Cost per client day	\$192	\$227	\$192	\$205	\$205 ³	\$222
K	Occupancy rate	96.8%	86.8%	96.1%	93%	93% ⁴	93%
S	Staff to client ratio	1.64	1.60	1.64	1.65	1.65 ⁵	1.61
S	Average length of stay (in days)	1,550	1,673	1,550	1,550	1,550 ⁶	1,550
S	Percentage of clients served by the rehabilitation department with documented maintenance or improvement ⁷	Not Available ⁷	Not Available ⁷	93%	93%	93% ⁷	93%

¹ The reduction in staff with the reduction in admissions resulted in a lower average daily census. Also, this indicator must stay within the standards for client to employee ratio. Estimated number of participant days (76,650) divided by number of days in period (365).

² The number of admissions plus the patients that are on census.

³ The increase over the Act 12 standard is related to the cost of maintaining staff at a certain level in order to care for the complex needs of the patients served. Also, fixed costs are included. As the census decreases and fixed cost remain the same, the result is a higher cost per day. In FY 2000-2002, expenditures (\$15,710,356) divided by expected patient days (76,650).

⁴ The decrease is due to a moratorium on admission for a period of approximately 5 months to get to a level of patients that could be properly cared. Average daily census (210) divided by staffed beds (225).

⁵ A reduction in patients to stay within an acceptable ratio for patient care. A decrease in staff resulted in a reduction in the patient census. T.O.(370) divided by the number of staffed beds (225).

⁶ Number of clients days not changed. Based on a historical estimate.

⁷ This indicator reflects if patients are maintaining or improving function. Also, it gives information on any loss of function. This performance indicator was not a standard in FY 2000-2001. An estimate of 93% is used.

DEPARTMENT ID: 09- Department of Health and Hospitals

AGENCY ID: 09-319 - Villa Feliciana Medical Complex

PROGRAM ID: Program B - Patient Services

GENERAL PERFORMANCE INFORMATION:					
PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
	PRIOR YEAR ACTUAL FY 1996-97	PRIOR YEAR ACTUAL FY 1997-98	PRIOR YEAR ACTUAL FY 1998-99	PRIOR YEAR ACTUAL FY 1999-00	PRIOR YEAR ACTUAL FY 2000-01
Number of staffed beds	275	275	275	275	248 ¹
Total number of clients served by the rehabilitation department	Not Available ²	112	124	97	Not Available ²
Number of clients served by the rehabilitation department with documented maintenance or improvement	Not Available ²	25	31	27	Not Available ²
Total number of admissions	72	77	97	111	68 ³
Occupancy rate	94.2%	92.0%	90.0%	85.5%	86.4% ⁴
Cost per client day	\$168.40	\$176.00	\$186.00	\$202.71	\$227.32 ⁵
Average length of stay in days	1,127	1,511	1,103	875	1,673 ⁶

¹ Decrease in T.O. resulted in a lower number of staffed beds.² These indicators were not part of the performance standards in FY 1996-1997 or FY 2000-2001.³ A moratorium placed on admissions for 5 months starting on March 29, 2001 due to budget reductions.⁴ A lower census due to moratorium on admissions resulted in lower occupancy rate.⁵ Cost increased due to fewer admission and the fixed cost of the facility.⁶ The increase of this indicator is a result of lower discharge rates and death rates in that fiscal year.